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Bib Data Sheet

CONFIRMATION NO. 9960

SERIAL NUMBER 10/805,813	FILING DATE 03/22/2004 RULE	CLASS 435	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. 9115
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APPLICANTS

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** CONTINUING DATA ***** *NONE, SH*

** FOREIGN APPLICATIONS ***** *NONE, SH*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/07/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>SH</i>	STATE OR COUNTRY DE	SHEETS DRAWING 2	TOTAL CLAIMS 60	INDEPENDENT CLAIMS 8
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TITLE
 Assays for amphetamine and methamphetamine using stereospecific reagents

FILING FEE RECEIVED 1920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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